 	FEE DETERMINA	

Effective October 1, 2001

Application or Docket Number

1002945

CLAIMS AS			S FILED - PART I (Column 1) (Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY			
TOTAL CLAIMS		31	1				RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS		}/minus 20=		* 11			X\$ 9=	99	OR	X\$18=		
INDEPENDENT CLAIMS		minus 3 = *		*			X42=	42	OR	X84=		
MULTIPLE DEPENDENT CLAIM P			RESENT		•	.140	, ,		.000			
* If the difference in column 1 is less than zero, enter "0" in column 2						+140=		OR	+280=			
CLAIMS AS AMENDED - PART II							TOTAL	511	OR	TOTAL	THAN	
	C.	(Column 1)	(Column 2) (Column 3)				SMALL ENTITY			OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	٠	= .		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	T CLAIM		J	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)			mn 2)	(Column 3)				_		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	S. Marine and S.	NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIL	=	4	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	·
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u> =	┨┃	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	IT CLAIM	1	J			1	1360,	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280= TOTAL	ļ	
** If the entry in column 1 is less than the entry in column 2, write "o" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												